



3801 N. University Dr. Ste. 401    PERMITS (954) 572-2354    INSPECTIONS  
 Sunrise, Florida 33351    FAX (954) 572-2357    (954) 572-2380 · 8:00 - 3:00

PERMIT APPLICATION DATE  
 CITY OF SUNRISE USE ONLY

PERMIT No. _____				
FOLIO NUMBER: _____				
SEC. _____	TWP. _____	AGE. _____	ZONE _____	
OWNER'S _____				
OWNER'S ADDRESS _____				
CITY _____		PHONE _____		
CONTRACTING FIRM _____				
MAIL ADDRESS _____				
CITY _____		PHONE _____		
JOB ADDRESS _____				
LOT _____		BLOCK _____		
SECTION _____		ADDITION _____		
PRESENT USE _____				
PROPOSED USE _____				
NUMBER OF STORES _____		OFFICES _____		
FAMILIES _____		BEDROOMS _____	BATHS _____	
TYPE OF WORK	ADD	NEW	ALTER	REPAIR
DESCRIBE _____				

APPLICATION is hereby made to obtain a permit to do the work and installations as indicated, I certify that no work or installation has been effected prior to the issuance of said permit and that all work will be performed to meet the standards of all laws regulating construction in BROWARD COUNTY and the CITY OF SUNRISE whether specified in this application and accompanying plans or not. I understand that a separate permit must be secured for ELECTRICAL, PLUMBING, WELLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONERS.

CONTRACTOR  
 Certificate of Competency No. \_\_\_\_\_  
 State Registration No. \_\_\_\_\_

I certify that all work will be done to comply to all FEDERAL, STATE, COUNTY & CITY laws, rules, regulations and resolutions regulating construction and zoning, and further state that no violation exists on this property.

Print Name \_\_\_\_\_  
 Signature \_\_\_\_\_

STATE OF FLORIDA  
 COUNTY OF BROWARD  
 Certificate of Competency No. \_\_\_\_\_  
 Subscribed & Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_ 20 \_\_\_\_\_  
 \_\_\_\_\_  
 Notary Public

Residential _____	Commercial _____	
Principal Bldg. \$ _____ \$ _____		
B.R.A. Surcharge _____		
Radon Trust Fund _____		
Building Code Fund _____		
Certification Maint. Fee _____		
Roof _____		
Addition _____		
Alteration _____		
Pool _____		
Fence _____		
Screen/Pool Enc. _____		
Concrete Slab _____		
Awning/Tent _____		
Sign _____		
Other _____		
Plan Submitted Fee Pd # _____	( _____ )	
TOTAL AMOUNT DUE \$ _____		
Remarks _____		
_____		
_____		
_____		
"FAILURE TO COMPLY WITH THE MECHANICS LIEN LAW CAN RESULT IN THE PROPERTY OWNER PAYING TWICE FOR BUILDING IMPROVEMENTS"		
"NOTICE, in addition to the requirements of this PERMIT, there may be additional restrictions applicable to this property that may be found in the public records of this County, and there may be additional permits required from other governmental entities, such as water management districts, state agencies or federal agencies."		
<ul style="list-style-type: none"> <li>· Give 24 hours notice for inspections.</li> <li>· Plans must be on the job before inspection will be made.</li> <li>· Obtain certificate of occupancy from Dept. before using completed Building.</li> </ul>		
ELEVATION	PROPOSED	AS BUILT
Finish Floor	_____	_____
Crown of Road	_____	_____
All Elevations N.G.V.D.	_____	_____



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## INSPECTOR'S REPORT

### Building Inspections

TYPE OF INSPECTION	APPROVED		DISAPPROVED		
	DATE	INITIAL	DATE	INITIAL	REASON
<b>FOUNDATION</b>					
<b>SLAB</b>					
<b>TIE BEAM</b>					
<b>FRAMING</b>					
<b>ROOF</b>					
<b>COLUMN</b>					
<b>FINAL BLDG.</b>					
<b>REMARKS</b>					